

## ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTHState File No. 148Registered No. 148

## 1. PLACE OF BIRTH

County GilaState Arizona

District or Township

or Village

City MiamiNo. 1149 Sullivan St.

St.

Ward

2. Full name of child Chotilda Calvillo

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

If child is not yet named, make supplemental report, as directed.

3. Sex of Child FemaleTo be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other.

5. No., in order of birth.

6. Legitimate? yes

7. Date

of birth Mar. 23-1930.  
Month Day Year

8.

FATHER

Full name Louis Calvillo

9. Residence

(Usual place of abode) Miami,If non-resident, give place and state. Arizona10. Color or race Mex11. Age at last birthday 24 (Years)12. Birthplace (city or place) Aguas Calientes(State or country) Mex.

13. Occupation

Nature of Industry Miner

14.

MOTHER

Full maiden name Carmen Campos

15. Residence

(Usual place of abode) Miami,If non-resident, give place and state. Arizona16. Color or race Mex17. Age at last birthday 21 (Years)18. Birthplace (city or place) Tepec(State or country) Mex.

19. Occupation

Nature of Industry Housewife

20. Number of children of this mother.

(Taken as of time of birth of child herein  
certified and including this child.) 4(a) Born alive and now living. 4

(b) Born alive but now dead.

(c) Stillborn 021. Were precautions taken against oph-  
thalmia neonatorum? yes

## CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was born alive at 5 A. m. on the date above stated.  
(Born alive or stillborn)Signature Cyril M. Cron M.D.Physician

(Physician or midwife.)

Address Miami, ArizonaFiled April 8 1930

Registar.

Registar.

\*When there was no attending physician  
or midwife, then the father, householder,  
etc., should make this return. A stillborn  
child is one that neither breathes nor  
shows other evidence of life after birth.Given name added from  
a supplemental report.

Month, day, year

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